Case:18-06150-BKT7 Doc#:1 Filed:10/22/18 Entered:10/22/18 16:19:17 Desc: Main Document Page 1 of 61

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF PUERTO RICO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Iden	tify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full	name			
	your gove	name that is on ernment-issued entification (for your driver's	RAMON First name		ELISANDRA First name
	license or passport).	Middle name		Middle name	
	Bring you identificat meeting v	r picture ion to your vith the trustee.	SANTIAGO VELEZ Last name and Suffix (Sr., Jr., II, III)		MARTINEZ AHORRIO Last name and Suffix (Sr., Jr., II, III)
2.		names you have he last 8 years			
	Include yo maiden na	our married or ames.			
3.	your Soc number o Individua	last 4 digits of ial Security or federal Il Taxpayer ation number	xxx-xx-8773		xxx-xx-1532

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Debtor 1 RAMON SANTIAGO VELEZ
Debtor 2 ELISANDRA MARTINEZ AHORRIO

Case number (if known)

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
		■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)			
	doing business as names					
		EINS	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		ABRA SAN FRANCISCO #162 MARTINEZ STREET Arecibo, PR 00612				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Arecibo	County			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		PO BOX 873 Arecibo, PR 00613				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 RAMON SANTIAGO VELEZ
ELISANDRA MARTINEZ AHORRIO Case number (if known)

7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by 1</i> f page 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bankrupto box.		
	choosing to file under	■ Ch	Chapter 7					
		☐ Ch	apter 11					
		☐ Ch	apter 12					
		☐ Ch	apter 13					
8.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subr	pically, if you are paying the fee you	with the clerk's office in your local court for more de rself, you may pay with cash, cashier's check, or mo f, your attorney may pay with a credit card or check		
					tallments. If you choose this option ts (Official Form 103A).	, sign and attach the Application for Individuals to P		
			request that but is not req	at my fee be wa juired to, waive y	aived (You may request this option your fee, and may do so only if you	only if you are filing for Chapter 7. By law, a judge mr r income is less than 150% of the official poverty line installments). If you choose this option, you must fill		
9.	Have you filed for	■ No.		on to Have the C	Shapter / Filing Fee Waived (Offici	al Form 103B) and file it with your petition.		
	bankruptcy within the last 8 years?	☐ Yes						
	lade o your or	□ 163	District		When	Case number		
			District		When	Case number		
			District		When	Case number		
0.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	•					
			Debtor	-		Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
	Do you rent your residence?	■ No.	Go to I	ine 12.				
11.		☐ Yes	Has yo	our landlord obta	ained an eviction judgment against	you?		
11.		□ 163						
11.		□ 163		No. Go to line	12.			

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Debtor 1 **RAMON SANTIAGO VELEZ** Debtor 2 **ELISANDRA MARTINEZ AHORRIO** Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? ☐ Yes. Name and location of business A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs

Number, Street, City, State & Zip Code

urgent repairs?

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Debtor 1 RAMON SANTIAGO VELEZ
Debtor 2 ELISANDRA MARTINEZ AHORRIO

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case:18-06150-BKT7 Doc#:1 Filed:10/22/18 Entered:10/22/18 16:19:17 Desc: Main Document Page 6 of 61

Debtor 1 Poebtor 2 RAMON SANTIAGO VELEZ

ELISANDRA MARTINEZ AHORRIO Case number (if known)

ar	t 6: Answer These Questi	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consu individual primarily for a personal,			defined in 11 U.S.C. §	101(8) as "incurred by an
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily busine money for a business or investme				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe the	hat are not consum	ner debts or bus	siness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab				nd administrative expenses
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-5	50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-1	
		□ 100-1 □ 200-9		1 0,001-25,00	00	☐ More tha	in100,000
		L 200-9					
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001 -			0,001 - \$1 billion
	be worth?		01 - \$100,000	□ \$10,000,001 □ \$50,000,001			00,001 - \$10 billion 000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001			in \$50 billion
20.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 -	\$10 million	□ \$500,000	0,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001			000,001 - \$10 billion
			001 - \$500,000	□ \$50,000,001 □ \$100.000.001			,000,001 - \$50 billion an \$50 billion
		□ \$500,	001 - \$1 million	— \$100,000,00		- I wiere une	ari quo billiori
ar	7: Sign Below						
or	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
			chosen to file under Chapter 7, I an tates Code. I understand the relief				
			rney represents me and I did not pant, I have obtained and read the not				elp me fill out this
		I request	relief in accordance with the chapt	er of title 11, United	d States Code,	specified in this petition	on.
			and making a false statement, conc ccy case can result in fines up to \$2: 1				
		/s/ RAN	ION SANTIAGO VELEZ			RA MARTINEZ AH	
		_	N SANTIAGO VELEZ e of Debtor 1		ELISANDRA Signature of D	A MARTINEZ AHOR Debtor 2	RIO
		Executed	d on October 22, 2018		Executed on	October 22, 2018	
			MM / DD / YYYY			MM / DD / YYYY	

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Debtor 1 RAMON SANTIAGO VELEZ
Debtor 2 ELISANDRA MARTINEZ AHORRIO

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Maribel Rubio	Date	October 22, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Maribel Rubio		
Printed name		
Rubio Bello Law Firm		
Firm name		
55 Calle A		
Urb Jardines de Arecibo		
Arecibo, PR 00614		
Number, Street, City, State & ZIP Code		
Contact phone 787-879-5149	Email address	lic.rubiobello@gmail.com
209911 PR		
Bar number & State		

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		Docum	ent Page 8 of 61	
Fill in this infor	mation to identify your	case:		
Debtor 1	RAMON SANTIAC	GO VELEZ		
	First Name	Middle Name	Last Name	
Debtor 2	ELISANDRA MAR	RTINEZ AHORRIO		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF PUERTO	RICO	
Case number (if known)				☐ Check if this is an amended filing
Official Ec	orm 106Sum			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	60,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,741.61
	1c. Copy line 63, Total of all property on Schedule A/B	\$	66,741.61
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	50,857.51
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	49,836.95
	Your total liabilities	\$	100,694.46
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,752.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,108.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes		

the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

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Debtor 1 RAMON SANTIAGO VELEZ
Debtor 2 FLISANDRA MARTINEZ ALIORRI

Debtor 2 **ELISANDRA MARTINEZ AHORRIO** Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,843.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port A on Cohodula E/E compthe followings	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this inform	nation to identify your		1 496 10 01 0		
Debtor 1	RAMON SANTIA				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	RTINEZ AHORRIO Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF PUERTO RICO			
Case number _			-		☐ Check if this is an amended filing
Schedule In each category, se think it fits best. Be information. If more	e as complete and accur e space is needed, attach	Derty be items. List an asset only once. If a ate as possible. If two married people a separate sheet to this form. On th	e are filing together, b	ooth are equally responsible for	r supplying correct
Answer every ques Part 1: Describe		g, Land, or Other Real Estate You Ov	vn or Have an Interest	ı İn	
1. Do you own or h	ave any legal or equitab	le interest in any residence, building	, land, or similar prope	erty?	
☐ No. Go to Part	t 2.				
Yes. Where is	s the property?				
1.1		What is the property	y? Check all that apply		
#40B PINE	N FRANCISCO EIRO STREET RIBA WARD	■ Single-family Duplex or mul	home Iti-unit building	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.

Condominium or cooperative Street address, if available, or other description ■ Manufactured or mobile home Current value of the Current value of the Land **Arecibo** PR 00612-0000 entire property? portion you own? City State ZIP Code ☐ Investment property \$60,000.00 \$60,000.00 ☐ Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or Who has an interest in the property? Check one a life estate), if known. ☐ Debtor 1 only **Arecibo** ☐ Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Single family house made of concrete & concrete blocks of four (4) bedrooms, one (1) bathroom, kitchen, livingroom, diningroom, carport, receiver and terrace. On a lot of land with a supreficial surface of 678.87

 Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

square meters.

\$60,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Case:18-06150-BKT7 Doc#:1 Filed:10/22/18 Entered:10/22/18 16:19:17 Desc: Main Document Page 11 of 61 **RAMON SANTIAGO VELEZ** Debtor 1 **ELISANDRA MARTINEZ AHORRIO** Debtor 2 Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes **TOYOTA** Who has an interest in the property? Check one Make: Do not deduct secured claims or exemptions. Put **PK2 EXTRA LONG CAB** the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: **DELUXE** 1992 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$3,700.00 \$3,700.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$3,700.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Livingroom furniture set (\$300.00) Diningroom furniture set (\$100.00) Stove (\$150.00) Refrigerator (\$200.00) Dishes & kitchen utensils-appliances (\$100.00) Micorwave (\$30.00) Bedroom \$1,230.00 furniture set (\$300.00) Bed (\$50.00) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... TV (\$250.00) Stereo (\$60.00) \$310.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No

9. Equipment for sports and hobbies

☐ Yes. Describe.....

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

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Debtor 1 Debtor 2	RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHORI	RIO Case numb	er (if known)
■ No	ns bles: Pistols, rifles, shotguns, ammunitio Describe	n, and related equipment	
11. Clothe <i>Exam</i> ☐ No	s <i>cles</i> : Everyday clothes, furs, leather coa	ts, designer wear, shoes, accessories	
	Describe		
	Pants, shirts, sho	es & other wearing apparel things	\$300.00
	Dresses, skirts, p apparel things	ants, shirts, blouses, shoes & other wearing	\$350.00
□ No		engagement rings, wedding rings, heirloom jewelry, watch	nes, gems, gold, silver
	Gold wedding rin	gs	\$300.00
■ No □ Yes.	Give specific information he dollar value of all of your entries f	ru did not already list, including any health aids you did rom Part 3, including any entries for pages you have a	
Part 4: De	scribe Your Financial Assets		
	n or have any legal or equitable inter	rest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	oles: Money you have in your wallet, in y	our home, in a safe deposit box, and on hand when you fil	e your petition
Exam _l		al accounts; certificates of deposit; shares in credit unions, counts with the same institution, list each.	brokerage houses, and other similar
□ No ■ Yes.		Institution name:	
	17.1. Shares	CooPACA	\$185.62
	17.2. Checking	Oriental Bank	\$242.73

Official Form 106A/B Scho

page 3

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Document Page 13 of 61 **RAMON SANTIAGO VELEZ** Debtor 1 **ELISANDRA MARTINEZ AHORRIO** Debtor 2 Case number (if known) **Banco Popular of PR** \$123.26 17.3. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No $\hfill \square$ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

☐ Yes. Give specific information about them...

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		D 4 14 0 1 1 0 4 1 1 7 1 4 4	Docu	ment Page 1	.4 of 61				
Debtor 1 Debtor 2		RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHORRIO Case number (if known)							
		funds owed to you							
	■ No								
	⊔ Yes.	Give specific information	on about them, including whetl	her you already filed the	e returns and the tax years				
29.		support		al Malana and an abatan					
	■ No	·		, child support, mainter	ance, divorce settlement, property	rsettiement			
	☐ Yes.	Give specific information	on						
	Exam _l				ay, vacation pay, workers' compe	nsation, Social Security			
	■ No □ Yes.	Give specific informat	ion						
		sts in insurance policioles: Health, disability,		gs account (HSA); cred	it, homeowner's, or renter's insural	nce			
	_	Name the insurance co	ompany of each policy and list	its value.					
			Company name:		Beneficiary:	Surrender or refund value:			
	If you somed	are the beneficiary of a one has died.			licy, or are currently entitled to rec	eive property because			
	□ res.	Give specific informat	ion						
			, whether or not you have fil ment disputes, insurance clain		a demand for payment				
	_	Describe each claim							
2.4	Othor	contingent and unliqu	uidatad alaima of avary natur	ro including counters	Jaima of the debtor and rights to	s set off plaims			
	■ No			re, including counterc	laims of the debtor and rights to	o set on ciaims			
	⊔ Yes.	Describe each claim							
35.	Any fir ■ No	nancial assets you did	d not already list						
	☐ Yes.	Give specific informat	ion						
36			of your entries from Part 4, i er here	0 ,	for pages you have attached	\$551.61			
Pa	rt 5: De	scribe Any Business-Re	lated Property You Own or Have	e an Interest In. List any r	real estate in Part 1.				
37.	Do you	own or have any legal or	equitable interest in any busine	ess-related property?					
		o to Part 6.							
	☐ Yes. (Go to line 38.							
Pa			ommercial Fishing-Related Prop t in farmland, list it in Part 1.	erty You Own or Have ar	n Interest In.				
46.		u own or have any leg	al or equitable interest in an	y farm- or commercia	Il fishing-related property?				
	_	Go to Part 7. Go to line 47.							
	⊥ res	5. OU tO III IE 47.							

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

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Debt			Case number (if known)	
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	t?		
_	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form	hat number here		\$0.00
rail	6. List the rotals of Each Part of this Politi			
55.	Part 1: Total real estate, line 2			\$60,000.00
56.	Part 2: Total vehicles, line 5	\$3,700.00		
57.	Part 3: Total personal and household items, line 15	\$2,490.00		
58.	Part 4: Total financial assets, line 36	\$551.61		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$6,741.61	Copy personal property total	\$6,741.61
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$66,741.61

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this infor	mation to identify your	case:		
Debtor 1	RAMON SANTIAC	GO VELEZ		
	First Name	Middle Name	Last Name	
Debtor 2	ELISANDRA MAR	RTINEZ AHORRIO		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF PUERTO	RICO	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

		•	-		
	☐ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	1992 TOYOTA PK2 EXTRA LONG CAB DELUXE	\$3,700.00		\$3,700.00	11 U.S.C. § 522(d)(2)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Livingroom furniture set (\$300.00) Diningroom furniture set (\$100.00)	\$1,230.00		\$1,230.00	11 U.S.C. § 522(d)(3)
	Stove (\$150.00) Refrigerator (\$200.00) Dishes & kitchen utensils-appliances (\$100.00) Micorwave (\$30.00) Bedroom furniture set (\$300.00) Bed (\$50.00)			100% of fair market value, up to any applicable statutory limit	
	Line from Schedule A/B: 6.1				
	TV (\$250.00) Stereo (\$60.00) Line from Schedule A/B: 7.1	\$310.00		\$310.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	Pants, shirts, shoes & other wearing apparel things	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

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ELISANDRA MARTINEZ AHORRIO Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Dresses, skirts, pants, shirts, 11 U.S.C. § 522(d)(3) \$350.00 \$350.00 blouses, shoes & other wearing apparel things 100% of fair market value, up to Line from Schedule A/B: 11.2 any applicable statutory limit Gold wedding rings 11 U.S.C. § 522(d)(4) \$300.00 \$300.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Shares: CooPACA** 11 U.S.C. § 522(d)(5) \$185.62 \$185.62 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Oriental Bank** 11 U.S.C. § 522(d)(5) \$242.73 \$242.73 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Checking: Banco Popular of PR 11 U.S.C. § 522(d)(5) \$123.26 \$123.26 Line from Schedule A/B: 17.3 П 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

RAMON SANTIAGO VELEZ

Debtor 1

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		DUCUIII	HE Paue to UI O.	<u>l</u>	
Fill in this inforr	mation to identify your	case:			
Debtor 1	RAMON SANTIA	GO VELEZ			
	First Name	Middle Name	Last Name		
Debtor 2	ELISANDRA MAF	RTINEZ AHORRIO			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	DISTRICT OF PUERTO	RICO		
Case number _					21 I- 'K II-'-
(II KNOWN)				_	Check if this
					amended filii

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral. Column B Value of collateral that supports this claim

\$60,000.00

Unsecured portion If any \$0.00

Column C

MR. COOPER Describe the property that secures the claim: \$50,857.51 Creditor's Name **ABRA SAN FRANCISCO #40B PINEIRO STREET HATO ARRIBA** WARD Arecibo, PR 00612 Arecibo County Single family house made of concrete & concrete blocks of four (4) bedrooms, one (1) bathroom, kitchen, livingroom, diningroom, ATTN. BANKRUPTCY carport, receiver and DEPT. As of the date you file, the claim is: Check all that PO BOX 619094 apply Dallas, TX 75261-9741 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed

Who owes the debt? Check one.

Nature of lien. Check all that apply.

- ☐ Debtor 1 only Debtor 2 only
- An agreement you made (such as mortgage or secured car loan)
- Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another
- ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit
- ☐ Check if this claim relates to a community debt

Mortgage Other (including a right to offset)

January, 2005

Date debt was incurred Last 4 digits of account number 0830

Add the dollar value of your entries in Column A on this page. Write that number here: \$50,857.51 If this is the last page of your form, add the dollar value totals from all pages. \$50,857.51 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			Do	ocument	Page 19	9 of 61		
Fill i	n this inforn	nation to identify your	case:					
Debt	or 1	RAMON SANTIAG	O VELEZ					
Debi	.01 1	First Name	Middle Name		Last Name		_	
Debt	or 2	ELISANDRA MAR	TINEZ AHORR	210				
	se if, filing)	First Name	Middle Name		Last Name		_	
Unite	ad States Rai	nkruptcy Court for the:	DISTRICT OF I	PLIERTO RICO				
Office	o otatos bai	inapiey Court for the.	DIGITATION OF I	OLIVIO MICO			-	
Case	e number							
(if kno	wn)							Check if this is an
							a	mended filing
–π:	aial Eama	- 400E/E						
		106E/F		_				=
<u>Scr</u>	<u>redule E</u>	/F: Creditors W	ho Have U	nsecured	Claims			12/15
Sched Sched eft. A name	lule G: Executule D: Credito ttach the Con and case nun	racts or unexpired leases tory Contracts and Unexpors Who Have Claims Sectinuation Page to this pagner (if known).	ired Leases (Offici ured by Property. I je. If you have no ii	al Form 106G). D f more space is i	o not include needed, copy	any creditors with part the Part you need, fill i	tially secured claims t out, number the en	that are listed in tries in the boxes on the
Part		I of Your PRIORITY Un						
	•	rs have priority unsecure	d claims against y	ou?				
•	No. Go to P	art 2.						
	☐ Yes.							
Part	2: List Al	I of Your NONPRIORIT	Y Unsecured Cla	aims				
3. [Oo any credito	rs have nonpriority unsec	cured claims again	st you?				
[☐ No. You hav	ve nothing to report in this p	art. Submit this form	to the court with	your other sche	edules.		
	Yes.							
•	■ Yes.							
t	insecured clair	nonpriority unsecured cl n, list the creditor separately or holds a particular claim, li	y for each claim. For	each claim listed	, identify what t	ype of claim it is. Do not	t list claims already inc	cluded in Part 1. If more
								Total claim
4.1	AT&T M	IOBILITY	Lac	st 4 digits of acc	ount number	8746		\$1,995.80
		Creditor's Name		or 4 digito of door		0140		Ψ1,333.00
		BANKRUPTCY DEPT	. Wr	en was the debt	incurred?	September, 201	7	_
		(537104						
		GA 30353-7104 treet City State Zlp Code	Λς	of the date you	filo the claim i	s: Check all that apply		
		rred the debt? Check one.	As	or the date you i	ille, tile cialili	s. Check all that apply		
	☐ Debtor		П	0				
	☐ Debtor	•		Contingent				
		-		Unliquidated				
		1 and Debtor 2 only	_	Disputed	ITV	d alaim.		
		t one of the debtors and and		pe of NONPRIOR	ii i unsecure	a ciaim:		
	☐ Check debt	if this claim is for a com	nunity	Student loans				
		m subject to offset?		Obligations arisin ort as priority clain		ration agreement or dive	orce that you did not	
	■ No	2,201.10 0110011				g plans, and other simila	ar dehts	
				· ·	-			
	☐ Yes		•	Other. Specify _	omity acco	unt		_

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Debtor 1 RAMON SANTIAGO VELEZ Debtor 2 ELISANDRA MARTINEZ AHORRIO Case number (if known) 4.2 **BANCO SANTANDER** \$1,230.00 Last 4 digits of account number 9097 Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? June, 2007 PO BOX 362589 San Juan, PR 00936 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving credit card account T Yes 4.3 **BPPR/POPULAR AUTO** Last 4 digits of account number 0301 \$2,361.90 Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? March, 2016 PO BOX 366818 San Juan, PR 00936-6818 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Auto loan that was guaranteed by vehicle 2014 Mitsubishi Mirage that was surrendered & repossesed by creditor on ☐ Yes Other. Specify February, 2018 4.4 **CLARO PUERTO RICO** Last 4 digits of account number \$351.00 9827 Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? September, 2007 PO BOX 70367 San Juan, PR 00936 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Telecommunications/Cellular

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Debtor 1 RAMON SANTIAGO VELEZ Debtor 2 ELISANDRA MARTINEZ AHORRIO Case number (if known) 4.5 **CLARO PUERTO RICO** \$176.00 Last 4 digits of account number 0036 Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? September, 2008 PO BOX 70367 San Juan, PR 00936 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Telecommunications/Cellular ☐ Yes 4.6 **CLARO PUERTO RICO** Last 4 digits of account number 6805 \$8.00 Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? February, 2014 PO BOX 70367 San Juan, PR 00936 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Telecommunications/Cellular ☐ Yes 4.7 **COOPACA** \$2,064.53 Last 4 digits of account number 5618 Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? November, 1994 **CALL BOX 1056** Arecibo, PR 00613-1056 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving credit card account ☐ Yes

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Debtor 1 RAMON SANTIAGO VELEZ Debtor 2 ELISANDRA MARTINEZ AHORRIO Case number (if known) 4.8 **DIRECT TV** \$76.34 Last 4 digits of account number 0605 Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? PO BOX 71556 San Juan, PR 00936-8514 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility account ☐ Yes 4.9 **FIRTS BANK** Last 4 digits of account number 1179 \$8,600.26 Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? **April**, 2005 PO BOX 9146 San Juan, PR 00908 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving credit card account ☐ Yes MIDLAND CREDIT MANAGEMENT, 4.1 2345 \$5,045.94 0 INC. as Last 4 digits of account number Nonpriority Creditor's Name Agent for MIDLAND FUNDING LLC. When was the debt incurred? August, 2011 **PO BOX 2011** Warren, MI 48090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Revolving credit card account originally with Synchrony Bank/Sam's Club Other Specify acc.#5213-3311-6145-3106 ☐ Yes

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Debtor 1 RAMON SANTIAGO VELEZ Debtor 2 ELISANDRA MARTINEZ AHORRIO Case number (if known) MIDLAND CREDIT MANAGEMENT, 4.1 \$5,271.48 4198 Last 4 digits of account number INC. as Nonpriority Creditor's Name Agent for MIDLAND FUNDING LLC. When was the debt incurred? March, 2008 **PO BOX 2011** Warren, MI 48090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Revolving credit card account originally with Synchrony Bank/Wal-Mart ☐ Yes Other. Specify acc.#5239-1410-4921-7379 MIDLAND CREDIT MANAGEMENT, 4.1 4185 \$7,430.14 Last 4 digits of account number INC. as Nonpriority Creditor's Name Agent for MIDLAND FUNDING LLC. When was the debt incurred? March, 2008 **PO BOX 2011** Warren, MI 48090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Revolving credit card account originally with Synchrony Bank/Wal-Mart ☐ Yes Other Specify acc.#5239-1410-4077-0624

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Debtor 1 RAMON SANTIAGO VELEZ Debtor 2 ELISANDRA MARTINEZ AHORRIO Case number (if known) MIDLAND CREDIT MANAGEMENT, 4.1 3000 \$6.891.35 3 Last 4 digits of account number INC. as Nonpriority Creditor's Name Agent for MIDLAND FUNDING LLC. When was the debt incurred? July, 2003 **PO BOX 2011** Warren, MI 48090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Revolving charge account originally with Synchrony Bank/Sam's Club ☐ Yes Other. Specify acc.#6045-9920-3227-5036 4.1 NEW AVON. LLC. 3205 \$93.37 Last 4 digits of account number Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? **ONE LIBERTY PLAZA, 165 BROADWAY** New York, NY 10006 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Products account ☐ Yes

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tor 2 ELISANDRA MARTINEZ AHORRIO	Case number (if known)				
PORTFOLIO RECOVERY ASSOCIATES, LLC.	Last 4 digits of account number	1103	\$1,776.35		
Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. PO BOX 12914	When was the debt incurred?	May, 2007			
Norfolk, VA 23541 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
☐ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
☐ Yes	■ Other. Specify Revolving Bank/Pep I	charge account with Synchrony Boys			
RADIO SHACK/CBNA	Last 4 digits of account number	7547	\$942.00		
Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. PO BOX 8189	When was the debt incurred?	August, 2003			
Johnson City, TN 37615 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community debt	Student loans	aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts			
Yes	Other. Specify Revolving	charge account			
SEARS CARDS/CBNA	Last 4 digits of account number	0821	\$1,973.00		
Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. PO BOX 62832	When was the debt incurred?	November, 2002			
Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
☐ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
☐ Yes	Other Specify Revolving	charge account			

Official Form 106 E/F

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Debtor 1 RAMON SANTIAGO VELEZ Debtor 2 ELISANDRA MARTINEZ AHORRIO Case number (if known) 4.1 SYNCHRONY BANK 1548 \$1,768.19 Last 4 digits of account number 8 Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? March, 2013 PO BOX 965060 Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Revolving charge account with Empresas ☐ Yes Other. Specify **Berrios Home Dsgn** 4.1 4739 SYNCHRONY BANK \$1,781.30 Last 4 digits of account number Nonpriority Creditor's Name ATTN. BANKRUPTCY DEPT. When was the debt incurred? May, 2007 PO BOX 965060 Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Revolving charge account with Pep ☐ Yes Other. Specify Boys/SYCC Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? CBE GROUP, INC. Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ATTN. BANKRUPTCY DEPT. Part 2: Creditors with Nonpriority Unsecured Claims PO BOX 2635 Waterloo, IA 50704-2635 Last 4 digits of account number 4562 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address CICA COLLECTION AGENCY, INC. Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ATTN. BANRUPTCY DEPT. Part 2: Creditors with Nonpriority Unsecured Claims PO BOX 12338 San Juan, PR 00914 Last 4 digits of account number 0222 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address CLIENT SERVICES, INC. Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ATTN. BANKRUPTCY DEPT. ■ Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 2 ELISANDRA MARTINEZ AHO	RRIO	Case number (if known)			
3451 HARRY S. TRUMAN BLVD. Saint Charles, MO 63301-4047					
	Last 4 digits of account number	1534			
Name and Address	On which entry in Part 1 or Part 2 d				
CLIENT SERVICES, INC. ATTN. BANKRUPTCY DEPT.	Line 4.19 of (Check one):	Part 1: Creditors with Priority Unsecured Claims			
3451 HARRY S. TRUMAN BLVD. Saint Charles, MO 63301-4047		■ Part 2: Creditors with Nonpriority Unsecured Claims			
oant onanes, mo 05501-4047	Last 4 digits of account number	2074			
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?			
GC SERVICES LIMITED	Line 4.17 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
PARTNERSHIP ATTN. BANKRUPTCY DEPT. PO BOX 3855 Houston, TX 77253		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Houston, 1X 11233	Last 4 digits of account number	0225			
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?			
LTD FINANCIAL SERVICES	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
LIMITED PARTNERSHIP 7322 SOUTHWEST FREEWAY, ST. 1600		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Houston, TX 77074-2053	Last 4 digits of account number	0260			
		0200			
Name and Address	On which entry in Part 1 or Part 2 d	,			
LUIS A. LOPEZ LOPEZ & ASSOC. EDIF. PARADISE CERAMICS	Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims			
#939 AVE. HOSTOS, OFIC. A1 2do.		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Mayaguez, PR 00680					
	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				 _
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 49,836.95
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 49,836.95

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Fill in this infor	mation to identify your	case:		
Debtor 1	RAMON SANTIA	GO VELEZ		
	First Name	Middle Name	Last Name	
Debtor 2	ELISANDRA MAF	RTINEZ AHORRIO		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF PUERTO	RICO	
Case number (if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Olato	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u>—</u>
2.4			<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		State	ZIF Coue	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	

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Fill in this infor	mation to identify your				
Debtor 1	RAMON SANTIA	30 VELEZ			
	First Name	Middle Name	Last Name		
Debtor 2		RTINEZ AHORRIO			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF PUERTO RIG	00		
Case number					
(if known)					Check if this is an amended filing
Official Fo					C
Official Fo		ahtara			
<u>Scheaule</u>	H: Your Cod	eptors			12/15
people are filing fill it out, and nu	together, both are equalities the entries in the	ally responsible for supplying	g correct information	as complete and accurate as p tion. If more space is needed, to this page. On the top of any	copy the Additional Page,
1. Do you h	ave any codebtors? (If	you are filing a joint case, do n	ot list either spouse	e as a codebtor.	
■ No □ Yes					
		ı lived in a community prope , Nevada, New Mexico, Puerto		ry? (Community property states an ington, and Wisconsin.)	and territories include
☐ No. Go to ■ Yes. Did y □ No ■ Ye	your spouse, former spo	use, or legal equivalent live wit	h you at the time?		
	In which community stat	e or territory did you live?	-NONE-	. Fill in the name and currer	nt address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zip				
3. In Column 1	I, list all of your codeb ain as a codebtor only , Schedule E/F (Officia	ors. Do not include your spo f that person is a guarantor	or cosigner. Make	r if your spouse is filing with your spouse is filing with you have listed the credit 06G). Use Schedule D, Schedu	tor on Schedule D (Official
	nn 1: Your codebtor Iumber, Street, City, State and Z	IP Code		Column 2: The creditor to Check all schedules that ap	•
3.1				☐ Schedule D, line	
Name				☐ Schedule E/F, line	
				☐ Schedule G, line	
Number	Street			_	
City		State	ZIP Code		
				Пол	_
3.2 Name				Schedule D, line	
inaille				☐ Schedule E/F, line	
				☐ Schedule G, line	
Number	Street			_	

State

City

ZIP Code

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Fill in this information to	o identify your case:	
Debtor 1	RAMON SANTIAGO VELEZ	
Debtor 2 (Spouse, if filing)	ELISANDRA MARTINEZ AHORRIO	
United States Bankrupt	ccy Court for the: DISTRICT OF PUERTO RICO	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u>106l</u>	MM / DD/ YYYY
Schedule I: '	Your Income	12/15
supplying correct info spouse. If you are sepa attach a separate shee	ccurate as possible. If two married people are filing together (rmation. If you are married and not filing jointly, and your spo arated and your spouse is not filing with you, do not include et to this form. On the top of any additional pages, write your	use is living with you, include information about your information about your spouse. If more space is needed,

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	☐ Employed
attach a separate page with information about additional		☐ Not employed	■ Not employed
employers.	Occupation	Maintanence	Housewife
Include part-time, seasonal, or self-employed work.	Employer's name	FSM MAINTENANCE, INC.	
Occupation may include student or homemaker, if it applies.	Employer's address	(HOSPITAL PAVIA ARECIBO) PO BOX 190410 San Juan, PR 00919-0410	
	How long employed the	here? <u>1 year</u>	_
art 2: Give Details About Mo	nthly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 1,300.00 \$ 0.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 1,300.00 \$ 0.00

Official Form 106I Schedule I: Your Income page 1

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RAMON SANTIAGO VELEZ Debtor 1 Debtor 2 **ELISANDRA MARTINEZ AHORRIO** Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 1.300.00 0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 91.00 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 Required repayments of retirement fund loans 0.00 5d. 5d. 0.00 5e. Insurance 5e. 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ \$ 0.00 0.00 5h. Other deductions. Specify: 5h.+ 0.00 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 91.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7 \$ 7 1,209.00 0.00 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a \$ 0.00 0.00 Interest and dividends \$ 8h. 8h. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. **Nutritional Assistance Program from State** 243.00 \$ 0.00 Specify: Pension or retirement income 8g. \$ 8g. \$ 0.00 0.00 8h.+ Other monthly income. Specify: Flukes cleaning a house 300.00 8h. \$ 0.00 \$ Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 243.00 300.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 1,452.00 \$ 300.00 \$ 1,752.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 11. +\$ 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 1,752.00 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Nο Yes. Explain:

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Debtor 1 RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHORRIO A supplement showing postpetition chapter 13 expenses as of the following date:	Fill	in this informa	ation to identify yo	our case:			1		
Deterr 2 ELISANDRA MARTINEZ AHORRO An amended filling Amended fil					/EI E7		Chi	ack if this is:	
United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO MM / DD / YYYY	Deb	101 1	KAWION SAN	ITIAGO V	ELEZ		_		g
United States Bankeuptcy Count for the: DISTRICT OF PUERTO RICO DISTRICT OF PUERTO RICO TMM / DD / YYYY			ELISANDRA	MARTIN	EZ AHORRIO	_			
Case number (It known) Case number Case	(Spo	ouse, if filing)						13 expenses as o	of the following date:
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part Describe Your Household	Unit	ed States Bankı	ruptcy Court for the	DISTRI	CT OF PUERTO RICO			MM / DD / YYYY	
Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Ratt Describe Your Household	1								
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 12	Of	fficial Fo	rm 106J						
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 12	So	chedule	J: Your l	Expen	ses				12/1
1. Is this a joint case? No. Go to line 2. No bos Debtor 2 live in a separate household? No Ose Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Denot list Debtor 1 and Pyes. Fill out this information for each dependent	Be info	as complete ormation. If m	and accurate as ore space is ne	possible.	If two married people ar ch another sheet to this				
No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and				hold					
Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2 will be file of this information for Debtor 2. Do not state the dependents names. No Yes. Do not state the dependents names. No Yes No Yes No No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. S 0.00 4d. Homeowner's association or condominium dues	١.	_							
No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Dependent		_		n a separa	ate household?				
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 1 and Debtor 2. Do not state the dependents names. Pes									
Do not list Debtor 1 and				st file Officia	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.	
Debtor 2. Debtor 1 or Debtor 2 age live with you? Do not state the dependents names. Debtor 1 or Debtor 2 age live with you? No Yes No Yes No Yes No Yes No Yes No Yes Satisfact Pour Ongoing Monthly Expenses Estimate Your ongoing Monthly Expenses as of a date after the bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income Your expenses 4. \$ 0.000 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.000 4d. Homeowner's association or condominium dues 4d. \$ 0.000	2.	Do you hav	e dependents?	■ No					
dependents names. Yes No No Yes No No Yes No Yes No No Yes Yes Yes No Yes Ye			ebtor 1 and	☐ Yes.				•	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 50.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00									= :::
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 1061.) If not included in line 4: 4a. Real estate taxes 4b. Real estate taxes 4c. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues		dependents	names.						` ` ` ` `
3. Do your expenses include expenses of people other than yourself and your dependents? No Yes									— · · · ·
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues									□ No
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. 4d. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 100 100 100 100 100 100 10								_	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 0.00									
Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues	3.				No				
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues					Yes				
expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 Homeowner's association or condominium dues	Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues	exp	enses as of a							
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues	the	value of suc	h assistance and					Your ex	penses
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 4d. \$ 0.00	(0		,,						
4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 0.00 4d. \$ 0.00	4.					nclude first mortgag	e 4.	\$	0.00
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 4d. \$ 0.00		If not include	ded in line 4:						
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 4d. \$ 0.00		4a. Real	estate taxes				4a.	\$	0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00				s, or renter	's insurance				
·									
	5.					me equity loans		·	

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		ON SANTIAGO VELEZ ANDRA MARTINEZ AHORRIO	Case num	ber (if known)			
6. Utilities:							
		city, heat, natural gas	6a.	\$	120.00		
	6b. Water,	sewer, garbage collection	6b.	\$	60.00		
	6c. Teleph	one, cell phone, Internet, satellite, and cable services	6c.	\$	130.00		
	6d. Other.	Specify: Gas	6d.	\$	20.00		
7.	Food and ho	ousekeeping supplies		\$	580.00		
8.	Childcare an	nd children's education costs	8.	\$	0.00		
9.	Clothing, lau	undry, and dry cleaning	9.	\$	100.00		
10.	Personal car	re products and services	10.	\$	90.00		
11.	Medical and	dental expenses	11.	\$	310.00		
12.		on. Include gas, maintenance, bus or train fare.	40	Φ.			
		e car payments.	12.	· <u> </u>	280.00		
		nt, clubs, recreation, newspapers, magazines, and books	13.	· -	80.00		
		ontributions and religious donations	14.	\$	30.00		
15.	Insurance.						
	15a. Life ins	le insurance deducted from your pay or included in lines 4 or 20.	15a.	¢	41.00		
	15b. Health		15a. 15b.	·	0.00		
	15c. Vehicle		15b.	·	17.00		
		insurance. Specify:	15d.	·			
16		ot include taxes deducted from your pay or included in lines 4 or 20.	13u.	Ψ	0.00		
	Specify:	, , ,	16.	\$	0.00		
17.		or lease payments: yments for Vehicle 1	17a.	\$	0.00		
		yments for Vehicle 2	17b.	·	0.00		
	17c. Other.	•	17b.	·	0.00		
	17d. Other.	· · · ·	17d. 17d.	·	0.00		
18		nts of alimony, maintenance, and support that you did not report as	17 u .	Ψ	0.00		
10.		om your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00		
19.		ents you make to support others who do not live with you.		\$	0.00		
	Specify:		19.				
20.	Other real pr	roperty expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.			
	20a. Mortga	ages on other property	20a.	\$	0.00		
	20b. Real es	state taxes	20b.	\$	0.00		
	20c. Proper	ty, homeowner's, or renter's insurance	20c.	\$	0.00		
	20d. Mainte	nance, repair, and upkeep expenses	20d.	\$	0.00		
	20e. Homeo	owner's association or condominium dues	20e.	\$	0.00		
21.	Other: Speci	fy: Lunch at work	21.	+\$	200.00		
22.	22a. Add line	our monthly expenses as 4 through 21. be 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$ \$	2,108.00		
				\$	2 109 00		
		22a and 22b. The result is your monthly expenses.		Φ	2,108.00		
23.	-	our monthly net income.	00-	¢.	4.750.00		
		ine 12 (your combined monthly income) from Schedule I.	23a.	*	1,752.00		
	23b. Copy y	our monthly expenses from line 22c above.	23b.	-\$	2,108.00		
		ct your monthly expenses from your monthly income. sult is your <i>monthly net income</i> .	23c.	\$	-356.00		
24.	For example, d modification to	ect an increase or decrease in your expenses within the year after you lo you expect to finish paying for your car loan within the year or do you expect your the terms of your mortgage?			or decrease because of a		
	■ No.						
	☐ Yes.	Explain here:					

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Fill in this info						
FIII IN this infor	mation to identify your	case:				
Debtor 1	RAMON SANTIAC					
	First Name	Middle Name	Last N	Name		
Debtor 2	ELISANDRA MAF	RTINEZ AHORRIO Middle Name	Loot N	Jama		
(Spouse if, filing)	First Name	Middle Name	Last N	varrie		
United States Ba	ankruptcy Court for the:	DISTRICT OF PUERTO F	RICO			
Case number						
(if known)					☐ Check if this is amended filing	an
f two married po You must file thi obtaining mone years, or both. 1	tion About a	n connection with a bankru	sible for su	pplying correct informations		
Did you pa	ay or agree to pay some	one who is NOT an attorne	ey to help y	ou fill out bankruptcy	forms?	
■ No						
☐ Yes. I	Name of person				tach Bankruptcy Petition Preparer's eclaration, and Signature (Official Fo	
	alty of perjury, I declare re true and correct.	that I have read the summ	ary and sc	hedules filed with this	declaration and	
X /s/ RA	MON SANTIAGO VEL	_EZ	X /	/s/ ELISANDRA MAR	TINEZ AHORRIO	
RAMO	N SANTIAGO VELEZ	<u>'</u>		ELISANDRA MARTIN	IEZ AHORRIO	
Signatu	re of Debtor 1		;	Signature of Debtor 2		
Date	October 22, 2018		ı	Date October 22, 20	18	

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Fill	in this inforn	nation to identify you	case:					
Deb	tor 1	RAMON SANTIA First Name	GO VELEZ Middle Name	Loot Nome				
Deh	tor 2		RTINEZ AHORRIO	Last Name				
	ise if, filing)	First Name	Middle Name	Last Name				
Unit	ed States Ba	nkruptcy Court for the:	DISTRICT OF PUERTO I	RICO				
Cas (if kno	e number					heck if this is an mended filing		
Sta Be as	s complete a mation. If m	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup y additional pages, write you			
Part		,	rital Status and Where You	Lived Before				
1.	What is you	current marital statu	s?					
	■ Married □ Not mar	ried						
2.	During the la	ng the last 3 years, have you lived anywhere other than where you live now?						
	■ No □ Yes. Lis	t all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .			
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
					ity property state or territory co, Texas, Washington and W			
	□ No ■ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Ol	fficial Form 106H).				
Part	2 Explai	n the Sources of You	r Income					
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?		
	□ No ■ Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,000.00	☐ Wages, commissions, bonuses, tips	\$0.00		
			☐ Operating a business		☐ Operating a business			

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RAMON SANTIAGO VELEZ Debtor 1 **ELISANDRA MARTINEZ AHORRIO** Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$16,218.20 ☐ Wages, commissions, \$0.00 ■ Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$16,414.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until Tax Refunds (2017 PR **Donation from** \$836.00 \$1,500.00 the date you filed for bankruptcy: Tax Returns) Church to help with damages & loss due to Hurracaine Maria Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ...

still owe

paid

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Debtor 1 RAMON SANTIAGO VELEZ Debtor 2 **ELISANDRA MARTINEZ AHORRIO** Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Amount you Dates of payment Total amount Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Reason for this payment Dates of payment **Total amount** Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? 9 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Dates you gave Value Describe the gifts per person the gifts Person to Whom You Gave the Gift and Address:

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	btor 2 ELISANDRA MARTINEZ AHOF	RRIO	Ca	se number (if known)	
14.	Within 2 years before you filed for bankr	uptcy,	did you give any gifts or contributions	with a total	value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or c	contribut	ion.			
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	total	Describe what you contributed		Dates you contributed	Value
Par	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did yo	u lose anyth	ning because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and	Descri	ibe any insurance coverage for the los	is	Date of your	Value of property
	how the loss occurred		e the amount that insurance has paid. Lisnce claims on line 33 of Schedule A/B: P.		loss	lost
Par	rt 7: List Certain Payments or Transfers	s				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition properties. No Yes, Fill in the details.	prepari	ng a bankruptcy petition?			ty to anyone you
			Description and value of any proper	-4	Data navment	Amount of
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ ou	Description and value of any proper transferred	ту	Date payment or transfer was made	Amount of payment
	MARIBEL G. RUBIO BELLO, ESQ. RUBIO BELLO LAW FIRM PO BOX 140373 Arecibo, PR 00614-0373 lic.rubiobello@gmail.com		Attorney Fees			\$800.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that	ditors o	r to make payments to your creditors'	pehalf pay o	r transfer any proper	rty to anyone who
	No					
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have alm	ur busir s made	ness or financial affairs? as security (such as the granting of a sec			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred	payments	iny property or received or debts	Date transfer was made
	Porson's relationship to you			paid in exc	change	

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Debtor 1 RAMON SANTIAGO VELEZ
Debtor 2 ELISANDRA MARTINEZ AHORRIO

Case number (if known)

19.	beneficiary? (These are often called asset-proted		y property to a	self-settle	d trust or similar device o	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made
Pai	beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Tramade Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit sold, moved, or transferred, or other financial accounts; certificates of deposit; shares in banks, credit unions, b houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code)					
20	Within 4 year before you filed for benjoymton	Date Transfer was made n to purpose the position on the position on the position was not zero on the position on the position was not zero on the position on the position was not zero on the property Describe the property Value Code Date Transfer was made position was not zero on the position was not zero on the				
20.	sold, moved, or transferred? Include checking, savings, money market, or o	other financial accour	nts; certificates	s of deposi		
	No					
	☐ Yes. Fill in the details.					
	Address (Number, Street, City, State and ZIP			unt or	closed, sold, moved, or	before closing or
Part 8: 20. With sold included include		ar before you filed for	bankruptcy, a	ny safe de _l	posit box or other deposi	tory for securities,
	_					
		Address (Number, St		Describe	the contents	
22.	Have you stored property in a storage unit or p	1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed moved, or transferred? 1 e checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerag is, pension funds, cooperatives, associations, and other financial institutions. 2 of Financial Institution and less (Number, Street, City, State and ZIP Code) 2 of Financial Institution and less (Number, Street, City, State and ZIP Code) 3 of Storage Facility 2 ess (Number, Street, City, State and ZIP Code) 4 Of Storage Facility 2 ess (Number, Street, City, State and ZIP Code) 4 Of Storage Facility 4 Of Storage Facility 4 Of Storage Facility 5 ess (Number, Street, City, State and ZIP Code) 5 Of Storage Facility 6 ess (Number, Street, City, State and ZIP Code) 6 Of State and ZIP Code) 6 Of Storage Facility 6 State and ZIP Code) 6 Of Storage Facility 6 State and ZIP Code) 7 Of Someone Else 8 Uniold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust meone. 8 Of Storage Facility 8 of Storage Facility 9 ess (Number, Street, City, State and ZIP Code) 8 Of Storage Facility 9 Code) 8 Of Storage Facility 9 Code) 9 Of Storage Facility 10 Of Storage Facility 11 Of Storage Facility 12 Of Storage Facility 13 Of Storage Facility 14 Of Storage Facility 15 Of Storage Facility 16 Of Storage Facility 17 Of Storage Facility 18 Of Storage Facility 19 Of Storage Facility 10 Of Storage Facility	y?			
	_					
		to it? Address (Number, Se		Storage Units Struments held in your name, or for your less of deposit; shares in banks, credit unit ons. Sount or Date account was closed, sold, moved, or transferred any safe deposit box or other depository Describe the contents 1 year before you filed for bankruptcy? Describe the contents erty you borrowed from, are storing for, or the property Describe the property String pollution, contamination, releases indwater, or other medium, including states all law, whether you now own, operate, or the properties of the pro		
Pai	rt 9: Identify Property You Hold or Control for	r Someone Else				
23.	, , , ,	eone else owns? Inclu	ıde any proper	ty you bor	rowed from, are storing fo	or, or hold in trust
	Owner's Name	(Number, Street, City, S		Describe	the property	Value
Pai	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Describe the context of the property of the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Oyou hold or control any property that someone else owns? Include any property you borrowed from someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Oyou hold or control any property that someone else owns? Include any property you borrowed from someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Oyou hold or control of the following definitions apply: Environmental law means any federal, state, or local					
For	the purpose of Part 10, the following definitions	s apply:				
	toxic substances, wastes, or material into the	air, land, soil, surface	water, ground			
	Site means any location, facility, or property as	s defined under any e		law, wheth	er you now own, operate	, or utilize it or used
			as a hazardous	s waste, ha	zardous substance, toxic	substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 RAMON SANTIAGO VELEZ
Debtor 2 ELISANDRA MARTINEZ AHORRIO

25.	Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit o No Yes. Fill in the details.	Governmental unit Address (Number, Street, City, State and ZIP Code) f any release of hazardous material?	Environmental law, if you know it	Date of notice								
	Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of No Yes. Fill in the details.	Address (Number, Street, City, State and ZIP Code)		Date of notice								
	■ No □ Yes. Fill in the details.	f any release of hazardous material?		ZIP Code)								
	Yes. Fill in the details.											
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Date of notice												
		Il in the details. It is the details the										
26.	Have you been a party in any judicial or ad 	ministrative proceeding under any enviro	nmental law? Include settlements a	nd orders.								
		Name Address (Number, Street, City,	lature of the case									
Part	11: Give Details About Your Business or	Connections to Any Business										
27 . '	Nithin 4 years before you filed for bankrup	tcy, did you own a business or have any	of the following connections to any	business?								
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity, ei	ther full-time or part-time									
	☐ A member of a limited liability com	pany (LLC) or limited liability partnership	(LLP)									
	☐ A partner in a partnership											
	☐ An officer, director, or managing ex	recutive of a corporation										
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation										
	No. None of the above applies. Go to	Part 12.										
	Yes. Check all that apply above and fi	Il in the details below for each business.										
		Describe the nature of the business										
		Name of accountant or bookkeeper		number or ITIN.								
	Nithin 2 years before you filed for bankrun	tcy, did you give a financial statement to	anyone about your business? Inclu	de all financial								
	nstitutions, creditors, or other parties.											
i	nstitutions, creditors, or other parties.											
	☐ An owner of at least 5% of the votin No. None of the above applies. Go to Yes. Check all that apply above and fil Business Name Address (Number, Street, City, State and ZIP Code)	ng or equity securities of a corporation Part 12. Il in the details below for each business. Describe the nature of the business Name of accountant or bookkeeper	Do not include Social Dates business existe	Security r								

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Debtor 1	RAMON SANTIAGO VELEZ	Docume	iii Faye 41 C	71 01	
	ELISANDRA MARTINEZ AHORRIO			Case number (if known)	
	_				
Part 12:	Sign Below				
are true a	nd the answers on this <i>Statement of Financ</i> and correct. I understand that making a fals nkruptcy case can result in fines up to \$250 §§ 152, 1341, 1519, and 3571.	e statement,	concealing property	, or obtaining money or	
/s/ RAM	ON SANTIAGO VELEZ	/s/ EL	ISANDRA MARTIN	EZ AHORRIO	
RAMON	I SANTIAGO VELEZ	ELISA	NDRA MARTINEZ	AHORRIO	
Signatur	e of Debtor 1	Signat	ure of Debtor 2		
Date O	October 22, 2018	Date	October 22, 2018		
Did you a ■ No □ Yes	ttach additional pages to Your Statement o	of Financial A	Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
Did you p ■ No	ay or agree to pay someone who is not an	attorney to I	nelp you fill out bank	ruptcy forms?	
☐ Yes. N	ame of Person . Attach the Bankruptcy	Petition Prep	arer's Notice, Declara	tion, and Signature (Offici	al Form 119).

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Fill in this inform	ation to identify your o	2250:		1
Debtor 1	RAMON SANTIAG			
Debior 1	First Name	Middle Name	Last Name	
Debtor 2	ELISANDRA MAR	TINEZ AHORRIO		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	DISTRICT OF PUE	ERTO RICO	
Case number				
(if known)				Check if this is an
Official For		n for Indivi	iduals Filing Under Chapt	amended filing
Statemen	t of filteritio	ii ioi iiidivi	iduais Filling Officer Chapt	er / 12/15
	idual filing under chap		out this form if:	
■ you have lease You must file this	d personal property a form with the court w er is earlier, unless th	nd the lease has no ithin 30 days after y	of expired. You file your bankruptcy petition or by the date so time for cause. You must also send copies to the force is	
	ople are filing together I date the form.	in a joint case, both	h are equally responsible for supplying correct	information. Both debtors must
	nd accurate as possiblur name and case num		needed, attach a separate sheet to this form. Or	n the top of any additional pages,
Part 1: List You	ur Creditors Who Have	Secured Claims		
For any creditor information bel		rt 1 of Schedule D:	Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
Identify the cred	ditor and the property th	nat is collateral	What do you intend to do with the property the secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's MF	R. COOPER		■ Surrender the property.	■ No
name:			Retain the property and redeem it.	☐ Yes
Description of	ABRA SAN FRANC	ISCO #40B	Retain the property and enter into a Reaffirmation Agreement.	□ res
property	PINEIRO STREET I		Retain the property and [explain]:	
securing debt:	ARRIBA WARD Are		— retain the property and [explain].	
	00612 Arecibo Co			
	Single family hous concrete & concrete			
	four (4) bedrooms,			
	bathroom, kitchen,	livingroom,		
	diningroom, carpo	rt, receiver		
	and			
Part 2: List You	ur Unexpired Personal	Property Leases		
in the information	below. Do not list rea	l estate leases. Une	n Schedule G: Executory Contracts and Unexpirex expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p.	he lease period has not yet ended.
Describe your un	expired personal prop	perty leases		Will the lease be assumed?
Lessor's name:				□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHORRIO	Case number (if known)
Description Property:	n of leased	□ Yes
Lessor's n	ame: n of leased	□ No
Property:		☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	i di icasca	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	101104004	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	101104004	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:		☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	101104004	☐ Yes
Part 3:	Sign Below	
	alty of perjury, I declare that I have indicated my inten nat is subject to an unexpired lease.	ntion about any property of my estate that secures a debt and any personal
	AMON SANTIAGO VELEZ	X /s/ ELISANDRA MARTINEZ AHORRIO
	ION SANTIAGO VELEZ ature of Debtor 1	ELISANDRA MARTINEZ AHORRIO Signature of Debtor 2
Date	October 22, 2018	Date October 22, 2018

Fill in	in this information to identify your case:				heck o	one box only as d	irected ir	this form and in	Form
Debt	otor 1 RAMON SANTIAGO VELEZ				22A-1				
	otor 2 ELISANDRA MARTINEZ AHORRIO use, if filing)				1 .	There is no pres	umption	of abuse	
``	ted States Bankruptcy Court for the: District of Puerto Ric	0			□ 2.		nade und	ler <i>Chapter 7 Me</i>	
	e number				_	Calculation (Off		,	
(if kno	own)				□ 3.	The Means Test qualified military		t apply now beca but it could apply	
						heck if this is a	n amen	ded filing	
Off	ficial Form 122A - 1								
Ch	napter 7 Statement of Your Curre	en	t Mor	nthly In	con	ne			12/15
attach case i	s complete and accurate as possible. If two married people are ha separate sheet to this form. Include the line number to which number (if known). If you believe that you are exempted from a fying military service, complete and file Statement of Exemption Calculate Your Current Monthly Income	ch th a pre	he additior esumption	nal information of abuse beca	applie ause yo	es. On the top of aid	ny additio narily cor	onal pages, write ynsumer debts or be	our name and ecause of
1.	What is your marital and filing status? Check one only.								
	☐ Not married. Fill out Column A, lines 2-11.								
	■ Married and your spouse is filing with you. Fill out b	oth	Columns	A and B, line	s 2-11				
	☐ Married and your spouse is NOT filing with you. Yo	u a	nd your s	pouse are:					
	☐ Living in the same household and are not legally	se	parated.	Fill out both C	olumn	s A and B, lines 2	2-11.		
	☐ Living separately or are legally separated. Fill out penalty of perjury that you and your spouse are legaliving apart for reasons that do not include evading	ally	separated	under nonba	ankrup	tcy law that applie	es or that		
10 the	ill in the average monthly income that you received from all so 01(10A). For example, if you are filing on September 15, the 6-monder 6 months, add the income for all 6 months and divide the total by property, put the income from that property.	th pe	eriod would fill in the res	be March 1 thi sult. Do not incl	ough A lude an	ugust 31. If the amo y income amount m	ount of you ore than o	ur monthly income vonce. For example,	aried during if both
						umn A otor 1	Colum Debton		
	Your gross wages, salary, tips, bonuses, overtime, an payroll deductions).				II \$	1,300.00	\$	0.00	
	Alimony and maintenance payments. Do not include pa Column B is filled in.	•		•	\$	0.00	\$	0.00	
	All amounts from any source which are regularly paid of you or your dependents, including child support. In from an unmarried partner, members of your household, y and roommates. Include regular contributions from a spou filled in. Do not include payments you listed on line 3.	clud our	de regular depende	contributions	\$ \$	0.00	\$	0.00	
5.	Net income from operating a business, profession, or	far							
		•		tor 1					
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	- \$ _	0.00	Camu han-	. •	0.00	¢.	0.00	
	Net monthly income from a business, profession, or farm	è _	0.00	Copy here -	·> \$	0.00	\$	0.00	
6.	Net income from rental and other real property		Deb	tor 1					
	Gross receipts (before all deductions)	\$	0.00	101 1					

0.00

0.00 Copy here -> \$

\$

0.00

0.00

\$

-\$

\$

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

0.00

0.00

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Page 45 of 61 **RAMON SANTIAGO VELEZ** Debtor 1 **ELISANDRA MARTINEZ AHORRIO** Debtor 2 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 243.00 0.00 Nutritional Assistance Flukes from cleaning house 0.00 300.00 Total amounts from separate pages, if any. 0.00 \$ 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 1,543.00 \$ 300.00 \$ 1,843.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,843.00 Multiply by 12 (the number of months in a year) **x** 12 22,116.00 12b. The result is your annual income for this part of the form 12b 13. Calculate the median family income that applies to you. Follow these steps: PR Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 24,455.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sian Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ RAMON SANTIAGO VELEZ

RAMON SANTIAGO VELEZ

Signature of Debtor 1

Date October 22, 2018 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

X /s/ ELISANDRA MARTINEZ AHORRIO

ELISANDRA MARTINEZ AHORRIO

Signature of Debtor 2

Date October 22, 2018

MM / DD / YYYY

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Fill in this in	nformation to identify your case:	Check the appropriate box as directed in
Debtor 1	RAMON SANTIAGO VELEZ	lines 40 or 42:
Debtor 2	ELISANDRA MARTINEZ AHORRIO	According to the calculations required by this Statement:
(Spouse, if fill United States Case number (if known)	s Bankruptcy Court for the: District of Puerto Rico	■ 1. There is no presumption of abuse. □ 2. There is a presumption of abuse.
(II KIIOWII)		☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	t 1: Determine Your A	djusted Income					
1.	Copy your total current i	monthly income.	Copy line 11 fr	om Official Form 122	A-1 here=>	\$	1,843.00
2.	■ No. Fill in \$0 for the to ■ Yes. Is your spouse Fi ■ No. Go to line 3	ling with you?	,				
3.	On line 11, Column B of F expenses of you or your d No. Fill in 0 for the tot Yes. Fill in the information State each purpose For example, the inc	al on line 3.	ollow these steps: Int of the income you re		NOT regularly use	ed for the h	ousehold
		ou or your dependents.		\$\$ \$\$ \$\$	Copy total here:	=> - \$ _	0.00
4.	Adjust your current mon	thly income. Subtract line 3	3 from line 1.			\$	1,843.00

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Debtor 1 Debtor 2	RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHORRIO	Case number (if known)	
		·	

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,202.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ 52
- 7b. Number of people who are under 65 X 2
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 104.00 Copy here=> \$ 104.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 114
- 7e. Number of people who are 65 or older X ______0
- 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00

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Debtor 1 Debtor 2 RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHORRIO

Case number (if known)

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

		n information from	n the IRS, the U.S. Tr two parts:	ustee Program	has divided th	e IRS I	Local Stand	ard for ho	using for		
■ H	lousi	ng and utilities - I	nsurance and opera	ting expenses							
■ H	lousi	ng and utilities - N	Mortgage or rent exp	enses							
To a	answ	er the questions in	n lines 8-9, use the U	J.S. Trustee Pro	gram chart.						
			using the link specified able at the bankruptcy		instructions for	this for	m.				
8.			- Insurance and oper ted for your county for								502.00
9.	Hou	sing and utilities	- Mortgage or rent ex	cpenses:							
	9a.		of people you entered nty for mortgage or re					\$	536.00		
	9b.	Total average mor	nthly payment for all m	nortgages and ot	her debts secu	red by y	your home.				
			otal average monthly p to each secured credit en divide by 60.								
		Name of the credi	tor		Average mont	thly					
		-NONE-			\$						
			Total average mont	hly payment	\$	0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.	
	9c.	Net mortgage or re	ent expense.								
			otal average monthly If this amount is less t				\$	536.	Copy here=>	\$	536.00
10.	•		J.S. Trustee Program of your monthly ex					•	ect and	\$	0.00
	Ex	olain why:									
11.	Loc	al transportation e	expenses: Check the	number of vehic	les for which yo	ou claim	n an ownersl	nip or opera	ating expense.		
		. Go to line 14.									
	1	. Go to line 12.									
	□ 2	or more. Go to line	e 12.								
12.			pense: Using the IRS in the Operating Cos							\$	230.00

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Debtor 1 Debtor 2 RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHORRIO

13.	You may	ownership or lease expense: Using the IRS Local so not claim the expense if you do not make any loan on two vehicles.					
Vel	hicle 1	Describe Vehicle 1:					
13a.	Ownersh	ip or leasing costs using IRS Local Standard		\$	0.00		
13b.	•	monthly payment for all debts secured by Vehicle 1. clude costs for leased vehicles.					
	To calcul are contri	ate the average monthly payment here and on line 1 actually due to each secured creditor in the 60 month cy. Then divide by 60.		t			
	Nan	ne of each creditor for Vehicle 1	Average monthly payment				
	-NC	DNE-	\$				
		Total Average Monthly Payment	\$0.00	Copy here => -\$	C	Repeat this amount on line 33b.	
13c.		cle 1 ownership or lease expense line 13b from line 13a. if this amount is less than \$0,	enter \$0.	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2	Describe Vehicle 2:					
13d.	Ownersh	ip or leasing costs using IRS Local Standard		. \$	0.00		
13e.	Average leased ve	monthly payment for all debts secured by Vehicle 2. ehicles.	Do not include costs for	r			
	Nan	ne of each creditor for Vehicle 2	Average monthly payment				
			\$				
		Total Average Monthly Payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		cle 2 ownership or lease expense line 13e from line 13d. if this amount is less than \$0,	enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		ansportation expense: If you claimed 0 vehicles in tation expense allowance regardless of whether you			fill in the	Public \$	0.00
15.	also dedu	al public transportation expense: If you claimed 1 uct a public transportation expense, you may fill in whome than the IRS Local Standard for <i>Public Transp</i>	hat you believe is the ap				0.00

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Debtor 1 PLISANDRA MARTINEZ AHORRIO

Out	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	101	
16.	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$	91.00
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or		
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	0.00
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	2,665.00

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Debtor 1 Debtor 2 RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHORRIO

Add	itional	Expense Deductions The	se are additional de	eductions	s allowed by the	e Means Test.		
		Note	e: Do not include an	ny expen	se allowances	listed in lines 6-24.		
25.	insura					ses. The monthly expenses for health y necessary for yourself, your spouse, o	r	
	Health	insurance		\$	0.00			
	Disabi	lity insurance		\$	0.00			
	Health	savings account		+ \$	0.00			
	Total			\$	0.00	Copy total here=>	\$	0.00
	Do you	actually spend this total amou	int?					
		No. How much do you actually	y spend?					
		Yes		\$				
26.	continu	ue to pay for the reasonable an	d necessary care a mediate family who	and suppo o is unab	ort of an elderly le to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of ich expenses. These expenses may 9A(b).	\$	0.00
27.	Protect safety	ction against family violence. of you and your family under th	The reasonably ne le Family Violence	ecessary Preventi	monthly exper on and Service	ses that you incur to maintain the s Act or other federal laws that apply.		
	By law	, the court must keep the natur	e of these expense	s confide	ential.		\$	0.00
28.	Additi	onal home energy costs. You	r home energy cos	ts are in	cluded in your	insurance and operating expenses on		
	If you I	pelieve that you have home end of fill in the excess amount of ho		more tha	an the home er	nergy costs included in expenses on line		
		ust give your case trustee docu at claimed is reasonable and ne		actual ex	spenses, and y	ou must show that the additional	\$	0.00
29.	\$160.4		our dependent child			e monthly expenses (not more than nan 18 years old to attend a private or		
		ust give your case trustee docเ d is reasonable and necessary				ou must explain why the amount 3.		
	* Subje	ect to adjustment on 4/01/19, a	nd every 3 years af	ter that f	or cases begui	n on or after the date of adjustment.	\$	0.00
30.	higher		othing allowances i	in the IRS	S National Star	ctual food and clothing expenses are ndards. That amount cannot be more		
		a chart showing the maximum tions for this form. This chart m			•	·		
	You m	ust show that the additional am	ount claimed is rea	asonable	and necessary	/ .	\$	0.00
31.		nuing charitable contribution nents to a religious or charitable				ntribute in the form of cash or financial	+\$	0.00
32.		II of the additional expense d	eductions.				\$	0.00

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Debtor 1 Debtor 2 RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHORRIO

Dedu							
	uctions for Debt Payment						
lo T	pans, and other secured debt, fill in lin	ment, add all amounts that are contractually	_	,			
	Mortgages on your home:						erage monthly yment
33a.	Copy line 9b here				=>	\$	0.00
	Loans on your first two vehicles:					-	
33b.	Copy line 13b here				=>	\$	0.00
33c.					=>	\$	0.00
33d.	List other secured debts:					-	
Name	of each creditor for other secured debt	Identify property that secures the debt		Does payme include taxe insurance?			
				□ No			
	-NONE-			☐ Yes		\$	
		_		103		Ψ_	
				□ No			
				☐ Yes		\$	
				□ No			
				☐ No		. 0	
				- 🗀 165	_	+\$_	
					Со	ру	
33e.	Total average monthly payment. Add lin	es 33a through 33d	\$	0.00	tot	al re=>	\$ 0.00
0	r other property necessary for your su No. Go to line 35. Yes. State any amount that you must	pay to a creditor, in addition to the payments ion of your property (called the cure amount) information below.	•				
	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess	pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i>)	•	Total cure amount			Monthly cure amount
Nam	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the	pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i>) information below.	i.		÷ 60	- 4	Monthly cure
Nam	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the	pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i>) information below.	•		÷ 60	= \$	Monthly cure
Nam	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the	pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i>) information below. Identify property that secures the debt	i.		Co	ру	Monthly cure
Nam -NC	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the ne of the creditor	pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i>) information below. Identify property that secures the debt Tota	si. \$	amount	Co	py	Monthly cure amount
Nam -NC 35. D a	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the ne of the creditor ONE-	pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i>) information below. Identify property that secures the debt Tota	si. \$	amount	Co	py	Monthly cure amount
Namm -NC	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the de of the creditor ONE- No. Go to line 36.	pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i>) information below. Identify property that secures the debt Total a priority tax, child support, or alimony - to bankruptcy case? 11 U.S.C. § 507.	\$ al \$	amount	Co	py	Monthly cure amount

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Debtor 2	ELIS	SANDRA MARTINEZ AHORRIO		C	Case n	number (if known)
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Ba</i> ins for this form. <i>Bankruptcy Basics</i> may also be available.	s <i>ic</i> s specif			
	No.	Go to line 37.				
	Yes.	Fill in the following information.				
		Projected monthly plan payment if you were filing und	er Chapter	· 13	\$	s
		Current multiplier for your district as stated on the list in Administrative Office of the United States Courts (for and North Carolina) or by the Executive Office for Unit (for all other districts).	districts in A	Alabama	X	
		To find a list of district multipliers that includes your district link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				Copy total
		Average monthly administrative expense if you were f	iling under	Chapter 13		\$ here=> \$
		of the deductions for debt payment. es 33e through 36.				\$
Total	Deduc	tions from Income				
38. A	dd all c	of the allowed deductions.				
		ne 24, All of the expenses allowed under IRS e allowances	\$	2,665.	00	
	Copy lin	ne 32, All of the additional expense deductions	\$	0.	00	
	Copy lin	ne 37, All of the deductions for debt payment	+\$	0.	00	
		Total deductions	\$	2,665.	00	Copy total here=> \$ 2,665.00
Part 3:	Det	termine Whether There is a Presumption of Abuse				
39. C	alculat	e monthly disposable income for 60 months				
	39a. Co	ppy line 4, adjusted current monthly income	\$	1,843.	00	
	39b. Co	py line 38, <i>Total deductions</i>	- \$	2,665.	00	
		onthly disposable income. 11 U.S.C. § 707(b)(2). ibtract line 39b from line 39a	\$	-822.	00	Copy here=>\$ -822.00
	For the	next 60 months (5 years)				 x 60
	39d. To	tal. Multiply line 39c by 60	39	9d. \$	-49	19,320.00 Copy
40. F	ind out	whether there is a presumption of abuse. Check the	e box that a	applies:		
	■ The I	ine 39d is less than \$7,700*. On the top of page 1 of t	his form, c	heck box 1, 7	There	re is no presumption of abuse. Go to Part 5.
		line 39d is more than \$12,850*. On the top of page 1 of 4 if you claim special circumstances. Go to Part 5.	of this form	, check box 2	t, The	nere is a presumption of abuse. You may fill out
Г] The I	line 39d is at least \$7,700*, but not more than \$12,85	i0*. Go to l	line 41.		
		to adjustment on 4/01/19, and every 3 years after that f			r the	e date of adjustment.
						•

RAMON SANTIAGO VELEZ

Debtor 1

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ebtor 2	ELIS	SANDRA MARTINEZ AHORRIO		Case	e number (if known)		
			_				
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. A Summary of Your Assets and Liabilities and Certain Statistics Schedules (Official Form 106Sum), you may refer to line 3b on	al.	Information	\$x .25	٦	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 7			\$	Copy here=>	\$
		Multiply line 41a by 0.25					
259	% of y	ne whether the income you have left over after subtracting a your unsecured, nonpriority debt. the box that applies:	all a	allowed deduc	ctions is enough to pa	у	
		39d is less than line 41b. On the top of page 1 of this form, che part 5.	ecl	k box 1, <i>There i</i>	is no presumption of ab	use.	
		39d is equal to or more than line 41b. On the top of page 1 of <i>umption of abuse.</i> You may fill out Part 4 if you claim special circ					
Part 4:	Giv	ve Details About Special Circumstances					
13 Do w	nu hav	ve any special circumstances that justify additional expense		or adjustment	s of current monthly i	ncome f	or which there is no
		e alternative? 11 U.S.C. § 707(b)(2)(B).		or aujustinent	o or ourrent monthly i		or willow there is no
_							
■ N	o. Go	o to Part 5.					
□ Y		I in the following information. All figures should reflect your avera	зgє	e monthly expe	nse or income adjustme	ent for ea	ach
	ite	m. You may include expenses you listed in line 25.					
	ne	ou must give a detailed explanation of the special circumstances ecessary and reasonable. You must also give your case trustee dijustments.					
	G	Sive a detailed explanation of the special circumstances			erage monthly expens income adjustment	е	
				\$;		
				\$			
	_			 \$	·		
					· <u></u>		
Part 5:		ın Below					
	By si	gning here, I declare under penalty of perjury that the information	n c	on this statemer	nt and in any attachmer	nts is true	and correct.
					RA MARTINEZ AHO		
		AMON SANTIAGO VELEZ gnature of Debtor 1		ELISANDRA Signature of De	MARTINEZ AHORF	RIO	
Dat	•	~		October 22,			
	M	M / DD / YYYY	-	MM / DD / YY	YY Y	_	

RAMON SANTIAGO VELEZ

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Cha	pter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:18-06150-BKT7 Doc#:1 Filed:10/22/18 Entered:10/22/18 16:19:17 Desc: Main Document Page 59 of 61

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Puerto Rico

In	RAMON SANTIAGO VELEZ re ELISANDRA MARTINEZ AHORRIO		Case No.		
111	ELISANDRA MARTINEZ AHORRIO	Debtor(s)	Chapter	7	
		Debtor(s)	Chapter	·	
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendere	d or to
	For legal services, I have agreed to accept		\$	800.00	
	Prior to the filing of this statement I have received			800.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	bers and associates of my la	aw firm.
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				m. A
5.	In return for the above-disclosed fee, I have agreed to a	render legal service for all aspects	s of the bankruptcy of	ease, including:	
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors on here. 	atement of affairs and plan which tors and confirmation hearing, an reduce to market value; exe ons as needed; preparation	may be required; d any adjourned hea	rings thereof;	of
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			es, relief from stay acti	ons or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of as bankruptcy proceeding.	ny agreement or arrangement for	payment to me for r	epresentation of the debtor((s) in
	October 22, 2018	/s/ Maribel Rubio			
-	Date	Maribel Rubio			
		Signature of Attorne Rubio Bello Law I			
		55 Calle A	FIIIII		
		Urb Jardines de A			
		Arecibo, PR 0061			
		787-879-5149 Fa: lic.rubiobello@gn			
		Name of law firm	iiaii.com		

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United States Bankruptcy Court District of Puerto Rico

In re	RAMON SANTIAGO VELEZ ELISANDRA MARTINEZ AHO	RIO Case No.
		Debtor(s) Chapter 7
Γhe ab		IFICATION OF CREDITOR MATRIX that the attached list of creditors is true and correct to the best of their knowledge.
Date:	October 22, 2018	/s/ RAMON SANTIAGO VELEZ
		RAMON SANTIAGO VELEZ
		Signature of Debtor
Date:	October 22, 2018	/s/ ELISANDRA MARTINEZ AHORRIO
	· · · · · · · · · · · · · · · · · · ·	ELISANDRA MARTINEZ AHORRIO

Signature of Debtor

RAMON SANTIAGO VELEZ PO BOX 873 ARECIBO, PR 00613

CLIENT SERVICES, INC.
ATTN. BANKRUPTCY DEPT.
3451 HARRY S. TRUMAN BLVD.
SAINT CHARLES, MO 63301-4047

NEW AVON, LLC.
ATTN. BANKRUPTCY DEPT.
ONE LIBERTY PLAZA, 165 BROAD
NEW YORK, NY 10006

ELISANDRA MARTINEZ AHORRIO PO BOX 873 ARECIBO, PR 00613

COOPACA ATTN. BANKRUPTCY DEPT. CALL BOX 1056 ARECIBO, PR 00613-1056

PORTFOLIO RECOVERY ASSOCILL ATTN. BANKRUPTCY DEPT. PO BOX 12914 NORFOLK, VA 23541

MARIBEL RUBIO RUBIO BELLO LAW FIRM 55 CALLE A URB JARDINES DE ARECIBO ARECIBO, PR 00614

DIRECT TV ATTN. BANKRUPTCY DEPT. PO BOX 71556 SAN JUAN, PR 00936-8514

RADIO SHACK/CBNA ATTN. BANKRUPTCY DEPT. PO BOX 8189 JOHNSON CITY, TN 37615

AT&T MOBILITY ATTN. BANKRUPTCY DEPT. PO BOX 537104 ATLANTA, GA 30353-7104

FIRTS BANK ATTN. BANKRUPTCY DEPT. PO BOX 9146 SAN JUAN, PR 00908

SEARS CARDS/CBNA ATTN. BANKRUPTCY DEPT. PO BOX 62832 SIOUX FALLS, SD 57117

BANCO SANTANDER ATTN. BANKRUPTCY DEPT. PO BOX 362589 SAN JUAN, PR 00936

GC SERVICES LIMITED PARTNERSHIP SYNCHRONY BANK ATTN. BANKRUPTCY DEPT. ATTN. BANKRUPTCY DEPT. PO BOX 3855 HOUSTON, TX 77253

PO BOX 965060 ORLANDO, FL 32896-5060

BPPR/POPULAR AUTO ATTN. BANKRUPTCY DEPT. PO BOX 366818 SAN JUAN, PR 00936-6818

LTD FINANCIAL SERVICES LIMITED PARTNERSHIP 7322 SOUTHWEST FREEWAY, ST. 1600 HOUSTON, TX 77074-2053

CBE GROUP, INC. ATTN. BANKRUPTCY DEPT. PO BOX 2635 WATERLOO, IA 50704-2635

LUIS A. LOPEZ LOPEZ & ASSOC. EDIF. PARADISE CERAMICS #939 AVE. HOSTOS, OFIC. A1 2DO. PISO MAYAGUEZ, PR 00680

CICA COLLECTION AGENCY, INC. ATTN. BANRUPTCY DEPT. PO BOX 12338 SAN JUAN, PR 00914

MIDLAND CREDIT MANAGEMENT, INC. AS AGENT FOR MIDLAND FUNDING LLC. PO BOX 2011 **WARREN, MI 48090**

CLARO PUERTO RICO ATTN. BANKRUPTCY DEPT. PO BOX 70367 SAN JUAN, PR 00936

MR. COOPER ATTN. BANKRUPTCY DEPT. PO BOX 619094 DALLAS, TX 75261-9741